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Available online 21 January 2010

A response to “Autopsy Profiles of Malpractice Cases” [16(1) (2009) 7–10]

Dear Editor,

We read with interest a recently published research entitled “Autopsy Profiles of Malpractice Cases.”¹ We are impressed with the study bringing out the details of the doctors and specialties implicated in malpractice cases in Turkey. However, we have some reservations.

The authors mention that of the total 525 cases investigated for medical malpractice, in only 167 cases it was actually established, but the title suggests otherwise. The study is actually a profile of medical malpractice claims that also elaborates on the proven malpractice cases. The mean age indicated gives an incorrect impression of the frequency of distribution i.e. the mean age does not fall into the top three groups by frequency and is skewed by the large number of cases having an age of zero (perinatal deaths), rather the median age in the 5–95th percentile would have conveyed a better idea of the age distribution.

We believe that the term ‘physician’ in many places is improperly used and should have been replaced by the word ‘doctor’ instead, as there are many surgeons in the list of ‘physician’ specialties provided. The sum of number of cases in some and the sum of percentages in other tables do not add up to the indicated total below in Tables 2–6. We also are not sure if the term ‘Emergency Unit’ refers to emergency physicians or emergency surgeons. Why does this specialty not exist in Table 5? It would have been interesting to know the details as to how the non-doctor personnel were involved and accused of ‘Medical’ malpractice. We also had a doubt as who a ‘Practitioner’ is, as mentioned in Table 5. Moreover, the authors mentioned ‘clinical units of physicians’ in the title of Table 5 but have written the adjective used to refer to doctors of those departments thus disagreeing with the title.

The authors mention “In this study, the largest age group was formed by perinatal death cases (15.4%). This indicates the significance of stillborn cases among medical malpractice claims in Turkey.” We were unable to decipher the intended meaning, as stillbirth is only one component of perinatal mortality. Statements like “Generally physicians are sued for medical malpractice” and “Considering the duration of hospitalization, 51% was

formed by cases treated from 0 to 24 h, which somehow supports the Emergency Unit’s ranking first,” do not really convey much meaning.

Further, statements like “Differing from other studies, in this study, cases treated in Emergency Units had the highest rate (28%) (Table 2)” and “Contrary to literature, the medical malpractice rate was higher in patients with prolonged hospitalization” are surprisingly not supported by any references. The sentence “... for cases deceasing in the first 24 h, the rate of medical malpractice was 36%, while for the ones living for 21 days and over, this rate was 22% (Table 3)” is not reflected in Table 3 as mentioned by the authors. The categorization in Table 6 is not very appropriate viz., misdiagnosis and mistreatment being placed in different categories when the latter always follows the former.

Conflict of Interest

None declared.

Reference

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Available online 29 January 2010